

DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES

Communicable Disease Control

Tuberculosis (TB)

What is tuberculosis?

Tuberculosis is a bacterial disease usually affecting the lungs (pulmonary tuberculosis). Any other part of the body can also be affected. Common extra-pulmonary sites include the lymph nodes, kidneys, bones, and pleura. In an average year, approximately twenty cases of tuberculosis are reported in Montana.

Who gets tuberculosis?

Anyone can get tuberculosis, but some people are at higher risk. These include persons who share the same breathing space as someone with infectious tuberculosis (family, friends, co-workers), foreign-born people from countries where tuberculosis is common, homeless people, alcoholics, IV drug users, people living in long-term communal settings, and persons with weak immune systems, especially people with HIV infection.

How is tuberculosis spread?

Tuberculosis is spread through the air from one person to another. When a person with tuberculosis coughs or sneezes, the TB bacteria may get into the air. Prolonged exposure to the tuberculosis bacteria is normally necessary for transmission to occur.

How can I tell if I've been infected with TB?

A tuberculin skin test is the only way to find out if you have TB infection. You can get a skin test at your local health department or doctor's office. Most people do not need to get a skin test unless you have had known exposure to a person with tuberculosis disease, if your doctor determines you have symptoms of TB, if you are at high risk for TB, or if you need the test for occupational reasons.

What is the difference between tuberculosis infection and tuberculosis disease?

In most people who breathe in the tuberculosis bacteria and become infected, the body is able to fight the bacteria to stop them from growing. The bacteria become walled off by special cells in the body and become inactive, but they remain in the body and can become active later. This is called tuberculosis infection. People with tuberculosis infection (no disease) usually have a positive skin test reaction, usually have a normal x-ray, have no symptoms, don't feel sick and can't spread tuberculosis to others because they do not have disease themselves.

Tuberculosis disease develops when the tuberculosis bacteria become active because the immune system can no longer stop them from growing. Persons with tuberculosis disease usually have a positive skin test reaction, usually have an abnormal x-ray, are normally sick with one or more symptoms of disease and they can spread the tuberculosis infection to others.

What are the symptoms of tuberculosis disease?

Symptoms of tuberculosis of the lungs can include a bad cough that lasts 3 weeks or longer, chest pain and coughing up blood or phlegm. Other symptoms are fever, chills, night sweats, weight loss and fatigue.

How soon do symptoms appear?

Many people who have tuberculosis infection never develop tuberculosis disease. In others, especially people who have weak immune systems, develop disease soon after becoming infected. Others may get sick many years later. Medicine is often prescribed for people with tuberculosis infection to prevent them from developing disease.

When and for how long is a person able to spread tuberculosis?

A person with tuberculosis disease may remain infectious until he/she has been on appropriate treatment for a few days to several weeks. Laboratory tests must be run to determine exactly when each patient is no longer infectious.

What is the treatment for tuberculosis?

People with tuberculosis disease must complete the prescribed course of medicine for a minimum of 6 months duration. If not adequately treated, people with tuberculosis disease can continue to spread infection to others and may become severely ill and die.

What can be done to prevent the spread of tuberculosis?

The first priority of health departments is to ensure that all persons with tuberculosis disease complete a prescribed course of medicine until cured. This will stop transmission and prevent the development of drug-resistant strains of TB. The second priority is to perform timely and thorough investigations of close contacts of every tuberculosis case to determine who else has been infected and preventively treat these contacts to prevent them from developing disease in the future. The third priority is to provide screening and preventive therapy to other high-risk groups of people.